

**TRANSCRIPT
ORDER FORM**

7/1/08

COURT

ORDER NUMBER

**Trial Court of Massachusetts
Juvenile Court Department**



PART I - TO BE COMPLETED BY PERSON PLACING ORDER

A copy of the COURT ALLOWED MOTION to Prepare the Transcript must be attached to this Order Form.

NAME, ADDRESS, TELEPHONE, AND E-MAIL OF PERSON PLACING ORDER

NAME OF CASE

DOCKET NUMBER OF CASE

NUMBER OF
TRANSCRIPTS
ORDERED

☐ Original

☐ Copies

DATE(S) OF PROCEEDING(S)

IS THIS PROCEEDING PRESENTLY PENDING ON APPEAL?

☐ YES

☐ NO

Copies are for:

☐ Regular
Transcript

☐ Daily
Transcript

☐ Indigent
Transcript

NAC Number

Regular Transcript is \$3.00 per page for the original and \$1.00 per page for copies. Daily Transcript is \$4.50 per page for the original and \$1.50 per page for copies. Indigent Transcript is \$3.00 per page for the original, \$1.00 per page for the first copy, and \$0.10 per page for additional copies. NAC NUMBER MUST BE PROVIDED.

Portions Requested:

☐ Entire Proceeding ☐ Opening Statement (D) ☐ Opening Statement (P)

☐ Closing Argument (D) ☐ Closing Argument (P) ☐ Opinion Of Court

☐ Jury Instructions ☐ Sentencing ☐ Bail Hearing ☐ Voir Dire

☐ Testimony ☐ Pre-Trial Proceeding

Check One:

☐ Asst. Atty. Gen. ☐ Dist. Atty. ☐ Asst. Dist. Atty. ☐ Clerk

☐ CPCS Atty. ☐ Appellant ☐ Appellee ☐ Bar Advocate ☐ Other

Specify

ADDITIONAL COMMENTS:

I AGREE TO OBSERVE THE RESTRICTIONS ON THE USE OF SUCH TRANSCRIPT COPIES IN COOPERATION WITH THE OFFICE OF TRANSCRIPTION SERVICES.

Signature of Person Placing Order / Date

Specify

Specify

PART II - TO BE COMPLETED BY THE CLERK

NAME OF THE CLERK

COURT/ ROOM

CD NO.

DATE
RECORDED

BEGINNING TIME
STAMP

ENDING TIME
STAMP

JUDGE

SPECIAL INSTRUCTIONS
OR COMMENTS

For additional space, please see reverse side of form.

ORDERS WILL BE RETURNED IF TIME STAMPS ARE NOT PROVIDED.

Are the Case Docket, Log Notes, Exhibit, Jury, and/or Witness Lists attached to the Order Form? ☐ YES ☐ NO

Is the Court Allowed Motion attached to the Order Form? ☐ YES ☐ NO

THESE DOCUMENTS MUST BE ATTACHED TO THIS FORM.

CD COPIED BY (*Print Clearly*)

DATE COPIED ON

ADDITIONAL COMMENTS:

DATE ORDER RECEIVED

DATE ORDER SENT TO OTS

PART III - TO BE COMPLETED BY THE OFFICE OF TRANSCRIPTION SERVICES (OTS)

OTS RECEIPT STAMP

DATE ASSIGNED
TO TRANSCRIBER

TRANSCRIBER NAME

EXPECTED RETURN
DATE OF TRANSCRIPT

INSTRUCTIONS

Instructions to the Person Placing Order: Fill in Part I of this form. Use a separate form for each case and for each person requesting a transcript. **A COPY OF THE COURT ALLOWED MOTION TO PREPARE THE TRANSCRIPT MUST BE ATTACHED TO THIS ORDER FORM.** If the proceeding is pending on appeal, you must notify all other parties of your order so that multiple copies may be made simultaneously whenever possible. (You may use the **green** copy of this form for that purpose, or photocopy it if there is more than one other party.) Present the other four parts of this form, with carbons intact, to the Clerk.

Instructions to the Clerk: Check that Part I has been properly completed and is accompanied by the **COURT ALLOWED MOTION**. Please fill in Part II and keep in mind that requests will be returned if time stamps, case docket, log notes, exhibit, jury, and/or witness lists are not provided.

ESTIMATED COST OF TRANSCRIPT(S):

Estimated Total Pages

Approximate Length of Proceedings: _____ x 40 pph = _____
Total Time

TYPES OF ORDERS	PAGES	EST. COST	EST. COST x 50% =	DEPOSIT
Regular (original)	\$3.00x _____	= \$ _____	\$ _____ x 50% = \$ _____	
Regular (copies)	\$1.00x _____	= \$ _____	\$ _____ x 50% = \$ _____	
Daily (original)	\$4.50x _____	= \$ _____	\$ _____ x 50% = \$ _____	
Daily (copies)	\$1.50x _____	= \$ _____	\$ _____ x 50% = \$ _____	
Indigent (original)	\$3.00x _____	= \$ _____	\$ _____ x 50% = \$ _____	
Indigent (first copy)	\$1.00x _____	= \$ _____	\$ _____ x 50% = \$ _____	
Indigent (additional copies)	\$0.10x _____	= \$ _____	\$ _____ x 50% = \$ _____	

NAC NUMBER MUST BE PROVIDED FOR INDIGENT TRANSCRIPT REQUESTS.

PART II - TO BE COMPLETED BY THE CLERK (if applicable)

[illegible]